IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Atty. Docket No.:

001701.00241

Tamio IKEHASHI et al.

Serial No.:

10/665,019

Group Art Unit:

2818

Filed:

September 22, 2003

Examiner:

Nguyen, V.

For:

READ CIRCUIT OF NONVOLATILE

SEMICONDUCTOR MEMORY

Confirmation No.:

5703

Attn: Nguyen, V.

Fax No.:

703-872-9318

Buc

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Docket Number (Optional) 001701.00241

In re Application of: Tamio IKEHASHI et al.

Application No. 10/665,019 Filed: September 22, 2003

For: Read Circuit of Nonvolatile Semiconductor Memory

The owner Kabushiki Kaisha Toshiba of 100 percent interest in the Instant application hereby disclaims, except as provided below, the terminal part of the statutory term of any patent granted on the instant application, which would extend beyond the expiration date of the full statutory term defined in 35 U.S.C. 154 and 173, as presently shortened by any terminal disclaimer, of prior Patent No. 6,674,668. The owner hereby agrees that any patent so granted on the instant application shall be enforceable only for and during such period that it and the prior patent are commonly owned. This agreement runs with any patent granted on the instant application and is binding upon the grantee, its successors or assigns.

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FEE TRANSMITTAL	. Complete if Known									
• —	Application Number 10/665,019									
for FY 2004	Filing Date Septer			Septe	mber 22, 2003					
Effective 10/01/2003. Petent fees are subject to annual revision.	First Na	First Named Inventor Tamto IKEHASHI et al.								
	Examiner Name Nguye			Nguy	en, V.					
Applicant claims small entity status. See 37 CFR 1.27	Art Unit 2818									
TOTAL AMOUNT OF PAYMENT (\$) 110	Attorney Docket No. 001701.00241						<u> </u>			
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)									
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None Order	3. ADDITIONAL FEES Large Entity Small Entity									
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from Fee	1502 1503	640	2502	320	Plant issue fee					
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1203 290 2203 145 Multiple dependent claim, if not paid	1801	770	2801	385 F	Request for Continu	ued Examination (RCE)				
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SUBTOTAL (2) (\$) 0	Other fee (specify) Terminal Disclaimer *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 110									
SUBMITTED BY Complete (if applicable) Registration No. 0.5 0.00 0.00 0.00 0.00 0.00 0.00 0.0										
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